

10/10/01  
JC904 U.S. PTO

10-11-01

PTO/SB/05 (2/98)

Please type a plus sign (+) inside this box → 

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. **TI-29408**

First Named Inventor or Application Identifier

**Minsheng Wang**Title **A Parallel Implementation for Digital Infinite Impulse Response Filter**

Express Mail Label No.

**EL645458968US**

U.S. PRO

On Page 1 of the specification, before line 1, insert –This application claims priority under 35 USC § 119(e)(1) of provisional application number **60/242,454** filed **10/24/2000**.--

**APPLICATION ELEMENTS**

See MPEP Chapter 600 concerning utility patent application contents

1.  Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original, and a duplicate for fee processing)2.  Specification [Total Pages **12**]

- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R&D
- Reference to Microfiche Appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

3.  Drawing(s) (35 USC d113) [Total Sheets **4**]4. Oath or Declaration [Total Pages **1**]a.  Newly Executed (original or copy)b.  Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 17 completed)**[Note Box 5 below]**i.  **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s)  
named in the prior application,  
see 37 CFR 1.63(d)(2) and 1.33(b).5.  Incorporation By Reference (useable if Box 4b is checked)  
The entire disclosure of the prior application, from which a copy of  
the oath or declaration is supplied under Box 4b, is considered as  
being part of the disclosure of the accompanying application and is  
hereby incorporated by reference therein.**ADDRESS TO:**Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 202316.  Microfiche Computer Program (Appendix)7. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)

- a.  Computer Readable Copy
- b.  Paper Copy (identical to computer copy)
- c.  Statement verifying identical of above copies

**ACCOMPANYING APPLICATION PARTS**8.  Assignment Papers (cover sheet & Documents(s))9.  37 CFR 3.73(b) Statement  
(when there is an assignee)  Power of Attorney10.  English Translation Document (if applicable)11.  Information Disclosure Statement (IDS)/PTO-1449  Copies of IDS Citations12.  Preliminary Amendment13.  Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)14.  Small Entity Statement(s)  Statement filed in prior application  
(PTO/SB/09-12) Status still proper and desired15.  Certified Copy of Priority Document(s)  
(if foreign priority is claimed)16.  Other:

\* A new statement is required to be entitled to pay small entity fees, except where one has been filed in a prior application and is being relied upon.

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:

 Continuation Divisional Continuation-in-part (CIP)

of prior application No: /

Prior application information: Examiner \_\_\_\_\_

Group / Art Unit: \_\_\_\_\_

**18. CORRESPONDENCE ADDRESS**

Customer Number or Bar Code Label

23494

or  Correspondence address below

NAME			
ADDRESS			
CITY	STATE	ZIP CODE	
COUNTRY	TELEPHONE	(972) 917-5646	FAX (972) 917-4418

Name (Print/Type)	J. Dennis Moore	Registration No. (Attorney/Agent)	28,885
Signature			Date 10/10/01

**Burden Hour Statement:** This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

**FEE TRANSMITTAL**

Patent fees are subject to annual revision on October 1.

These are the fees effective October 1, 1997

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

**Complete If Known**

Application Number

Filing Date **10/10/2001**First Named Inventor **Minsheng Wang**

Examiner Name

Group / Art Unit

Attorney Docket No. **TI-29408**

TOTAL AMOUNT OF PAYMENT

(\$ **740.00**)**METHOD OF PAYMENT**1.  The Commissioner is hereby authorized to charge to the following

Deposit Account,

Deposit Account Number **20-0668**Deposit Account Name **Texas Instruments Incorporated**
 Charge any additional fee required or credit any overpayment
  Charge all indicated fees and any additional fee required or credit any overpayment
 2.  Payment Enclosed:
 Check  Money Order  Other
 **FEE CALCULATION****1. BASIC FILING FEE**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	790	201	395	Utility filing fee	<b>\$740</b>
106	330	206	165	Design filing fee	\$
107	540	207	270	Plant filing fee	\$
108	790	208	395	Reissue filing fee	\$
114	150	214	75	Provisional filing fee	\$
<b>SUBTOTAL (1)</b>					<b>(\$740)</b>

**2. EXTRA CLAIM FEES**

		Extra Claims	Fee from below	Fee Paid
Total Claims	8	-20** =	0 x 18 =	0.00
Independent Claims	2	-3** =	0 x 84 =	0.00
Multiple Dependent				

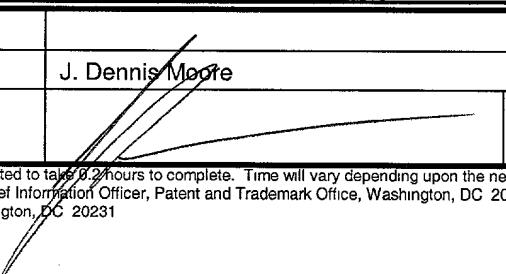
\*\*or number previously paid, if greater; For Reissue, see below

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	22	203	11	Claims in excess of 20
102	82	202	41	Independent Claims in excess of 3
104	270	204	135	Multiple dependent claims in excess of 3
109	82	209	41	**Reissue independent claims over original patent
110	22	210	11	**Reissue claims in excess of 20 and over original patent
<b>SUBTOTAL (2)</b>				<b>(\$0)</b>

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3) 0.00**

Complete (if applicable)

**SUBMITTED BY**Typed or Printed Name **J. Dennis Moore**Reg. Number **28,885**Signature Date **10/10/01**

Deposit Account User ID